

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare:

That my residence, post office address and citizenship are as stated below next to my name

That I verily believe I am the original, first and sole inventor (if only one name listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ADJUSTABLE LENGTH CABLING SYSTEM

the specification of which (check one)

☐ is attached hereto.
☒ was filed on September 26, 2006 as
 Application Serial No. 10/599,359
 and was amended on _____
 (if applicable)

That I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

That I acknowledge the duty to disclose information known to be material to patentability of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

That I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed

<u>PCT/us2005/010289</u> (Number)	<u>PCT</u> (Country)	<u>28/03/2006</u> (Day/Month/Year filed)	<input checked="" type="checkbox"/> <input type="checkbox"/> Yes No
<u> </u> (Number)	<u> </u> (Country)	<u> </u> (Day/Month/Year filed)	<input type="checkbox"/> <input type="checkbox"/> Yes No

That I hereby claim the benefit under Title 35, United States Code, Sections 119(e) and/or 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

United States Application(s)

<u>60/556,666</u> (Application Serial No.)	<u>03/26/2004</u> (Filing Date)	<u>Expired</u> (Status)-(Patented, pending, abandoned)
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(Application Serial No.)

(Filing Date)

(Status)-(Patented, pending, abandoned)

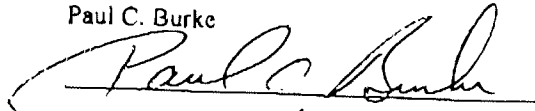
That all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issuing thereon.

I hereby appoint the attorneys and agents associated with Customer Number 051500, with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith and request that all correspondences and telephone calls in respect to this application be directed to the address associated with the Customer Number.

Full name of sole or one joint inventor

Paul C. Burke

Inventor's signature:


5/24/07

Date:

Residence and Post Office Address

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Citizenship:

U.S.

Full name of sole or one joint inventor

Mark Holmes

Inventor's signature:


25 May 07

Date:

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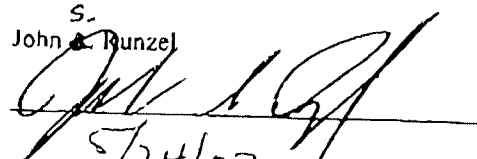
Citizenship:

U.S.

Full name of sole or one joint inventor

S.
John A. Runzel

Inventor's signature:


5/24/07

Date:

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Citizenship:

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